

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
19962YP

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A METHOD OF TREATING CANCER

the specification of which (check only one item below):

☐ is attached hereto.

☐ was filed as United States application

Serial No _____

on _____,

and was amended

on _____ (if applicable).

☒ was filed as PCT international application

Number PCT/US98/08646

on 4-Jun-1998,

and was amended under PCT Article 19

on _____ (if applicable).

☐ is being filed as PCT international application, Attorney Docket No. _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Continued) (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NUMBER 19962YP	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED	
60/048,736	5-Jun-1997			X	
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> David A. Muthard Regis. No. 35,297 </div> <div style="width: 45%;"> Mark R. Daniel Regis. No. 31,913 </div> </div>					
Send Correspondence to: DAVID A. MUTHARD Merck & Co., Inc. P.O. Box 2000, 126 East Lincoln Avenue Rahway, New Jersey 07065			Direct Telephone Calls to: <i>(name and telephone number)</i> (732) 594-3903		
201	FULL NAME OF INVENTOR	FAMILY NAME Rosen	FIRST GIVEN NAME Neal	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Englewood	STATE OR FOREIGN COUNTRY New Jersey	COUNTRY OF CITIZENSHIP US	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065	
202	FULL NAME OF INVENTOR	FAMILY NAME Sepp-Lorenzino	FIRST GIVEN NAME Laura	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY New Haven	STATE OR FOREIGN COUNTRY Connecticut	COUNTRY OF CITIZENSHIP US	
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203	FULL NAME OF INVENTOR	FAMILY NAME Moasser	FIRST GIVEN NAME Mark	SECOND GIVEN NAME M.	
	RESIDENCE & CITIZENSHIP	CITY New York	STATE OR FOREIGN COUNTRY New York	COUNTRY OF CITIZENSHIP US	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	

Continuation of Inventor Information

204	FULL NAME OF INVENTOR	FAMILY NAME Oliff	FIRST GIVEN NAME Allen	SECOND GIVEN NAME I.
	RESIDENCE & CITIZENSHIP	CITY Gwynedd Valley	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065
205	FULL NAME OF INVENTOR	FAMILY NAME Gibbs	FIRST GIVEN NAME Jackson	SECOND GIVEN NAME B.
	RESIDENCE & CITIZENSHIP	CITY Chalfont	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065
206	FULL NAME OF INVENTOR	FAMILY NAME Kohl	FIRST GIVEN NAME Nancy	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Wyndmoor	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065
207	FULL NAME OF INVENTOR	FAMILY NAME Graham	FIRST GIVEN NAME Samuel	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Schwensville	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY New Jersey	STATE & ZIP CODE/COUNTRY New Jersey 07065
208	FULL NAME OF INVENTOR	FAMILY NAME Prendergast	FIRST GIVEN NAME George	SECOND GIVEN NAME C.
	RESIDENCE & CITIZENSHIP	CITY Bala Cynwyd	STATE OR FOREIGN COUNTRY Pennsylvania	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 126 E. Lincoln Avenue	CITY Rahway	STATE & ZIP CODE/COUNTRY New Jersey 07065
209	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
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